

### CITY OF SUGAR LAND

**Permits & Inspections Department** 

#### RESIDENTIAL BUILDING PERMIT APPLICATION

APPLICATION # \*\* PLEASE NOTE \*\* 1 USB with electronic set of plans required with submittal VALUATION: \$\_\_\_\_\_ PROJECT ADDRESS: SQUARE FOOTAGE: LOT: \_\_\_\_\_ BLOCK: \_\_\_\_ SECTION: \_\_\_\_ SUBDIVISION: \_\_\_\_ HOMEOWNER NAME: \_\_\_\_\_\_PHONE: \_\_\_\_\_ Contractor Street Address City Zip Code Phone **EMAIL** State **TYPE OF** ☐ New Residential ☐ Piers/Pilings ☐ Fencing Pool ☐ Flatwork Demolition (\$56.50 flat fee) **PERMIT:** Residential Remodel Residential Addition ☐ Siding ☐ Moving (\$112.50 flat fee) Exterior Modifications Only: This work 

DOES DOES NOT lie within the authority of a HOA If it does, please provide a copy of notification letter sent to the HOA **DESCRIPTION OF WORK:** I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction. Signature Date Printed Name Phone Email Fax Cell Plan Check Fee (Due at time of submittal): \$\_\_\_\_\_

|                   | ı                 | FOR OFFICE USE ONLY       |
|-------------------|-------------------|---------------------------|
| Revised 4/16/2018 | PLAN REVIEWED BY: | APPROVED FOR ISSUANCE BY: |

PAY BY ESCROW ACCOUNT

**Building Permit Fee: \$** 

# **RESIDENTIAL PERMIT CHECK-LIST**

#### PLEASE VERIFY THE FOLLOWING INFORMATION BY PLACING A CHECK MARK BY EACH ITEM.

| 0    | & IF APPLICABLE - REScheck ENERG               | OWING PROPOSED CONSTRUCTION GY COMPLIANCE CERTIFICATE & |  |
|------|--|---|--|
| 0    | ELECTRICAL LOAD ANALYSIS COMPLETED APPLICATION |   |  |
| 0    | FLOODPLAIN REVIEW CHECKLIST (IF                | F APPLICABLE)   |  |
|      |  |   |  |
|      |  |   |  |
| Appl | icant Signature:                               | Date:   |  |



## CITY OF SUGAR LAND

### BUILDING PERMIT FLOODPLAIN REVIEW CHECKLIST

| AD  | DRESS: APPLICATION NO.:  |
|-----|--|
| 1.  | Is the proposed building/ structure located within a special flood-hazard area as shown on the Effective Flood Insurance Rate Map?  ( ) Yes ( ) No   |
| 2.  | Is the proposed building/ structure located within a floodway as shown on the Effective Flood Insurance Rate Map (FIRM)?  ( ) Yes ( ) No   |
| 3.  | If you answer yes to either of the above two questions, please complete the City's Floodplain Development Permit   |
| 4.  | Application and include the applicable fee. If you answer no to questions (1) and (2), please provide the following information, only if, the proposed buildings/ structures are located within 500 ft distance from a flood hazard area as shown on the effective FIRM: |
|     | • The distance (ft) of the proposed building/ structure from the effective flood-hazard area boundary:   |
|     | • Base-flood elevation (BFE) data in the proximity of the proposed building/ structure (ft):   |
|     | • Lowest Finished Floor Elevation of the proposed building/ structure (ft):  |
|     | • Natural (undisturbed) Ground Elevation at the site of the proposed building/ structure (ft):   |
|     | Attach Elevation Certificate or Elevation Survey from a Registered Surveyor or a Registered Engineer:  |
|     | → Please ensure that the datum used to report elevation data requested above are consistent (same datum). Otherwise, report datum adjustment factors.  |
| 5.  | Other relevant information   |
|     |  |
| Con | tact Name & number for Applicant:  |
|     | RECOMMENDATION   |
|     | Grant Permit Request Additional Information Deny Permit  |
|     | Building Official/ Floodplain Administrator Date   |